

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)<br/>FY 2008</b><br><i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i>   |  | Docket Number (Optional)<br>05587-00358-US |
|---|--|--|
| Application Number  | 10/688,615-Conf. #2436   | Filed October 17, 2003                     |
| For   | PROCESS AND APPARATUS FOR THE COMBINATORIAL PREPARATION OF MIXTURES, AND USE OF THESE  |  |
| Art Unit  | 1639   | Examiner J. S. Lundgren                    |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.  |  |  |
| The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):   |  |  |
|   | Fee  | Small Entity Fee                           |
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1))  | \$120  | \$60                                       |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))   | \$460  | \$230                                      |
| <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))  | \$1050   | \$525                                      |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))  | \$1640   | \$820                                      |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))  | \$2230   | \$1115                                     |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.<br><input type="checkbox"/> A check in the amount of the fee is enclosed.<br><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.<br><input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.<br><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to<br>Deposit Account Number <u>03-2775</u> . I have enclosed a duplicate copy of this sheet. |  |  |
| WARNING: Information on this form may become public. Credit card information should not be included on this form.<br>Provide credit card information and authorization on PTO-2038.   |  |  |
| I am the  | <input type="checkbox"/>   | applicant/inventor.                        |
| <input type="checkbox"/>  | assignee of record of the entire interest. See 37 CFR 3.71.<br>Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). |  |
| <input checked="" type="checkbox"/>   | attorney or agent of record. Registration Number <u>22,580</u>   |  |
| <input type="checkbox"/>  | attorney or agent under 37 CFR 1.34.   |  |
| Registration number if acting under 37 CFR 1.34   |  |  |
| <u>Richard M. Beck</u>  |  | January 2, 2008                            |
| Signature   |  | Date                                       |
| <u>Richard M. Beck</u>  |  | (302) 658-9141                             |
| Typed or printed name   |  | Telephone Number                           |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.   |  |  |
| <input type="checkbox"/>  | Total of <u>1</u> forms are submitted.   |  |

583751